



Attorney's Docket No. 1029650-000152 *2139*

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of	)	<b>MAIL STOP RCE</b>	)
Kenichi Sato et al.	)	Group Art Unit: 3761	)
Application No.: 10/500,327	)	Examiner: PHILIP R. WIEST	)
Filing Date: June 28, 2004	)	Confirmation No.: 8954	)
Title: BLOOD BAG SYSTEM AND METHOD	)		)
OF INACTIVATING PATHOGENIC	)		)
MICROORGANISMS	)		)

REQUEST FOR CONTINUED EXAMINATION (RCE)  
TRANSMITTAL LETTER

**MAIL STOP RCE**

Customer Number **21839**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Applicant(s) requests continued examination under 37 C.F.R. § 1.114 of the above-identified application and encloses the ☐ \$405 ☒ \$810 fee due under 37 C.F.R. § 1.17(e).

1. ☐ A. Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified in item 2 below.
- ☒ B. Applicant(s) previously submitted the following documents for which continued examination is requested:
  - ☒ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on September 5, 2007.
  - ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_.
2. The following documents are enclosed with this submission:
  - ☐ Amendment/Reply
  - ☐ Affidavit(s)/Declaration(s)
  - ☐ Information Disclosure Statement
  - ☒ Petition for Extension of Time

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3. ☐ Small entity status is hereby claimed.
- ☒ No additional claim fee is required.
- ☐ The fee is calculated below on the basis of the highest number of claims already paid for in this application prior to this submission:

					FEES
Examination Fee (1801)					\$ 810
	No. of Claims		Extra Claims	Rate	
Total Claims	4	20	0	x 50 (1202)	\$ 0
Independent Claims	1	3	0	x 210 (1201)	\$ 0
If multiple dependent claims are presented, add \$ 370					\$ 0
<b>Total Fee</b>					<b>\$ 810</b>
<input type="checkbox"/> Small Entity Status claimed - subtract 50% of Total Application Fee					\$ 0
<b>TOTAL FEE DUE</b>					<b>\$ 810</b>

4. ☐ Charge \_\_\_\_\_ to Deposit Account No. **02-4800** for the fee due.
5. ☐ A check in the amount of \_\_\_\_\_ is enclosed for the fee due.
6. ☒ Charge **\$ 930** to credit card for the fee due. Form PTO-2038 is attached.
7. ☒ The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BUCHANAN INGERSOLL &amp; ROONEY PC

Date: October 4, 2007By: Michael Britton  
Registration No. 47260P.O. Box 1404  
Alexandria, VA 22313-1404  
703 836 6620

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